Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Charmaine First name S. Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Clark Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you hav	/e		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1004		

Entered 03/31/17 15:59:19 Page 2 of 59 Case 17-80756 Doc 1 Filed 03/31/17 Desc Main Document

Case number (if known)

Debtor 1 Charmaine S. Clark

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	422 South Day Avenue Rockford, IL 61102	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 3 of 59

Case number (if known) Debtor 1 Charmaine S. Clark

ar	Tell the Court About	Your Ba	nkruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are	Check (Form			of each, see <i>Notice Re</i> page 1 and check the a		342(b) for Individuals Fil	ing for Bankruptcy
	choosing to file under	■ Chapter 7						
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
3.	How you will pay the fee	á	about how yo	ou may pay. Typi attorney is subm	cally, if you are paying	the fee yourself, you r	erk's office in your local may pay with cash, cash orney may pay with a cre	ier's check, or money
					allments. If you chooses (Official Form 103A).	e this option, sign and	attach the Application for	or Individuals to Pay
		_ k	out is not req applies to yo	equest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, t is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that plies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out a Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.				
		•	Потррпоци		napier / / iiiig / ee ma	woo (Gillolai i Gilli i G	ob, and more war your p	
).	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes						
			District		When			
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes						
			Debtor				Relationship to you	
			District		When		_ Case number, if known	
			Debtor				Relationship to you	
			District		When		_ Case number, if known	
11.	Do you rent your	□ No.	Go to I	ine 12.				
	residence?	■ Yes	. Has yo	our landlord obtain	ined an eviction judgme	ent against you and do	o you want to stay in you	r residence?
				No. Go to line 1	12.			
			_	Yes. Fill out <i>Init</i> bankruptcy peti		n Eviction Judgment A	gainst You (Form 101A)	and file it with this

Deb	otor 1 Charmaine S. Cla	rk		Document Pa	age 4 of 59	Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Owi	ı as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			per, Street, City, State & ZIP Code k the appropriate box to describe			
	n to the polition.			Health Care Business (as defir	-	§ 101(27A))	
				Single Asset Real Estate (as d	efined in 11 U.S.	C. § 101(51B))	
				Stockbroker (as defined in 11 l	J.S.C. § 101(53A	\)))	
				Commodity Broker (as defined	- ,		
				None of the above	_		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		NOT a small bus	iness debtor according to the definition in the Bankrupto	СУ
		☐ Yes.	I am	iling under Chapter 11 and I am	a small business	debtor according to the definition in the Bankruptcy Co	de.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any Property T	hat Needs Immo	ediate Attention	
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable bazard to	☐ Yes.	What is	the hazard?			

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 5 of 59

Debtor 1 Charmaine S. Clark

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 59 Case number (if known) Debtor 1 Charmaine S. Clark Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charmaine S. Clark Signature of Debtor 2 Charmaine S. Clark

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 31, 2017

MM / DD / YYYY

Debtor 1 Charmaine S. Clark

Document Page 7 of 59

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel /	A. Springer	Date	March 31, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Printed name	opi iligei		
Springer L	.aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	tate		

		Docume	ent Page 8 of 5	59	
Fill in this inform	nation to identify your	case:		i i	
Debtor 1	Charmaine S. Cla	nrk			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,420.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,420.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	178,006.62
	Your total liabilities	\$	178,006.62
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,749.19
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,723.00
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	:hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Charmaine S. Clark

Document Page 9 of 59
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______2,041.74

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	55,583.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	55,583.00

		Docum	nent Page 10 of 59		
Fill in this in	formation to identify your	case and this filing:			
Debtor 1	Charmaine S. Cla	ark			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					☐ Check if this is an
					amended filing
Official F	Form 106A/B				
Schod	ulo A/R: Pror	ortv			40/45
	ule A/B: Prop				12/15
hink it fits best	t. Be as complete and accura nore space is needed, attach	ate as possible. If two mar	v once. If an asset fits in more than or ried people are filing together, both a orm. On the top of any additional pag	are equally responsible for s	upplying correct
Part 1: Descr	ibe Each Residence, Building	g, Land, or Other Real Esta	ate You Own or Have an Interest In		
Do you own	or have any legal or oquitable	a interest in any residence	e, building, land, or similar property?	,	
. Do you own	of flave ally legal of equitable	e interest in any residence	e, building, land, or similar property?		
No. Go to	Part 2.				
☐ Yes. Whe	ere is the property?				
Part 2: Descr	ibe Your Vehicles				
□ No ■ Yes	, trucks, tractors, sport u	unity vernicles, motorcy	Lies		
O.4. Malaa	Chevrolet	What has an int	and in the mannet O or	Do not deduct secured of	claims or exemptions. Put
3.1 Make:			erest in the property? Check one	the amount of any secur	ed claims on Schedule D:
Model:	Equinox 2005	Debtor 1 only	,	Creditors who have Cla	ims Secured by Property.
Year:		Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
• • •	Information:		of the debtors and another	chare property:	portion you own:
		— At least one	of the debtors and another		
		☐ Check if thi	s is community property	\$2,725.00	\$2,725.00
		(see instructio	ns)		
Examples: B No Yes S Add the d pages you	Boats, trailers, motors, pers	onal watercraft, fishing v you own for all of your . Write that number her	entries from Part 2, including are	accessories ny entries for	\$2,725.00
you own	or nave any legal or equit	able interest in any of t	the following items?		portion you own?
					Do not deduct secured claims or exemptions.
Household	I goods and furnishings				oranio or oxempuons.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 11 of 59 Debtor 1 Case number (if known) Charmaine S. Clark Yes. Describe..... \$1,500.00 Household Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... **CD Collection** \$100.00 Books \$25.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 **Used Clothing** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,975.00 for Part 3. Write that number here

Official Form 106A/B Schedule A/B: Property page 2

Document Page 12 of 59 Debtor 1 Case number (if known) Charmaine S. Clark Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Rock Valley Federal Credit Union** \$0.00 17.1. **Savings Prepaid Debit Card** \$700.00 **Debit Card** 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

		Case 17-80756	Doc 1	Filed 03/31/17 Document	Entered 03/31/17 15:59:19	Desc Main		
De	ebtor 1	Charmaine S. Clark	(Document	Page 13 of 59 Case number (if known)			
	5. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them							
	 Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No □ Yes. Give specific information about them 							
	Exam _l ■ No	ses, franchises, and other oles: Building permits, exc Give specific information	clusive licenses,		n holdings, liquor licenses, professional license	es		
Mo	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.		
	■ No	funds owed to you Give specific information	about them, inc	luding whether you alrea	ady filed the returns and the tax years			
	29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No □ Yes. Give specific information							
	30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information							
31.	Exam _l	sts in insurance policies ples: Health, disability, or		ealth savings account (l	HSA); credit, homeowner's, or renter's insuran	ce		
	■ No □ Yes.	Name the insurance com	pany of each pompany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
	If you somed	terest in property that is are the beneficiary of a livene has died. Give specific information	ving trust, expec		ed surance policy, or are currently entitled to rece	vive property because		
	Exam _l ■ No	s against third parties, woles: Accidents, employm Describe each claim	ent disputes, ins		it or made a demand for payment s to sue			
	■ No	contingent and unliquid Describe each claim		every nature, including	g counterclaims of the debtor and rights to	set off claims		
	■ No	nancial assets you did n	-					

Debtor '	Charmaine S. Clark	Document	Page 14 of 59 Case numb	er (if known)
	d the dollar value of all of your entries from Part 4. Write that number here			ttached \$720.00
Part 5:	Describe Any Business-Related Property You Ov	vn or Have an Interes	t In. List any real estate in Part 1.	
37. Do y o	ou own or have any legal or equitable interest in a	any business-related	property?	
No.	Go to Part 6.			
☐ Yes	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Rel If you own or have an interest in farmland, list it in Pa		wn or Have an Interest In.	
16. Do y	ou own or have any legal or equitable inter	rest in any farm- o	commercial fishing-related prop	perty?
	No. Go to Part 7.			
	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an I	Interest in That You D	id Not List Above	
Exa	you have other property of any kind you did amples: Season tickets, country club members			
■ No				
⊔ Y€	es. Give specific information			
54. A d	d the dollar value of all of your entries from	n Part 7. Write that	number here	\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$0.00
56. Pa	rt 2: Total vehicles, line 5	_	\$2,725.00	
57. Pa	rt 3: Total personal and household items, li	ine 15	\$1,975.00	
58. Pa	rt 4: Total financial assets, line 36	_	\$720.00	
59. Pa	rt 5: Total business-related property, line 4	5 _	\$0.00	

\$0.00

\$0.00

Copy personal property total

\$5,420.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

60. Part 6: Total farm- and fishing-related property, line 52

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

\$5,420.00

\$5,420.00

		I A A A III III .		1.7
Fill in this inform	ation to identify your	case:		
Debtor 1	Charmaine S. Cla	rk		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
\$2,725.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$2,725.00	•	\$325.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00	•	\$1,500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00	•	\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$25.00	•	\$25.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$2,725.00 \$1,500.00	\$2,725.00	Check only one box for each exemption. \$2,725.00 \$2,400.00 100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$25.00 \$25.00 \$25.00 \$25.00

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 16 of 59
Case number (if known)

DCL	Charmanie o. Clark					
S	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	wn		Specific laws that allow exemption	
	,	Copy the value from Schedule A/B				
	Used Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)	
	Line Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit		
	Costume Jewelry Line from Schedule A/B: 12.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
L	Line from Schedule Arb. 12.1			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)	
L	Line from Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit		
	Debit Card: Prepaid Debit Card Line from Schedule A/B: 17.2	\$700.00		\$700.00	735 ILCS 5/12-1001(b)	
	Line Holli Schedule PAB. 17.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
	■ No					
	☐ Yes. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill in this inform					
Debtor 1	Charmaine S. Cla	rk			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 18 of 59	
Fill in this ir	nformation to identify your	case:		
Debtor 1	Charmaine S. Cla	rk		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case numbe	or			Check if this is an amended filing
	orm 106E/F e E/F: Creditors W	/ho Have Unsecured	l Claims	12/15
any executory Schedule G: E Schedule D: C left. Attach the name and case Part 1: Li	contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec e Continuation Page to this page e number (if known). st All of Your PRIORITY Un	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is ie. If you have no information to resecured Claims	TY claims and Part 2 for creditors with NONPRIORITY c list executory contracts on Schedule A/B: Property (Off Do not include any creditors with partially secured clair needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any ad	icial Form 106A/B) and on ns that are listed in entries in the boxes on the
_ `	reditors have priority unsecure	d claims against you?		
_	o to Part 2.			
☐ Yes.				
	st All of Your NONPRIORIT			
_ `	reditors have nonpriority unsectors have nothing to report in this p	cured claims against you? art. Submit this form to the court with	n your other schedules.	
4. List all of unsecured	d claim, list the creditor separately	y for each claim. For each claim liste	he creditor who holds each claim. If a creditor has more t d, identify what type of claim it is. Do not list claims already have more than three nonpriority unsecured claims fill out to	included in Part 1. If more
				Total claim
4.1 AT8	RT Mobility	Last 4 digits of ac	count number	\$1,342.00
Attr PO	oriority Creditor's Name n: Bankruptcy Dept. Box 536216	When was the deb	ot incurred?	_
Numl	htta, GA 30353-6216 ber Street City State Zlp Code incurred the debt? Check one.	As of the date you	file, the claim is: Check all that apply	
■ D	ebtor 1 only	☐ Contingent		
□ D	ebtor 2 only	☐ Unliquidated		
□D	ebtor 1 and Debtor 2 only	☐ Disputed		
□ A	t least one of the debtors and and	30101	RITY unsecured claim:	
	heck if this claim is for a comr	•		
debt			ing out of a separation agreement or divorce that you did no	t
Is the	e claim subject to offset?	report as priority cla	n or profit-sharing plans, and other similar debts	
		·	•	
□ Y	es	Other. Specify	Onnues	<u></u>

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 19 of 59

Debtor 1 Charmaine S. Clark Case number (if know) 4.2 \$1,611.00 AT&T Mobility Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 536216 Atlanta, GA 30353-6216 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Utilities ☐ Yes Other. Specify 4.3 **Banquet Financial** Last 4 digits of account number \$1,364.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 607 Dundee Ave Elgin, IL 60120 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Personal Loan** Other. Specify 4.4 Capital One Bank USA NA \$423.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes

Document Page 20 of 59 Debtor 1 Charmaine S. Clark Case number (if know) 4.5 \$700.00 CashNet Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 1301 Marina Village Pkwy Ste 100 Alameda, CA 94501-1058 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No Personal Loan ☐ Yes Other. Specify 4.6 **Citizens Finance** Last 4 digits of account number \$793.62 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Auto Deficiency ☐ Yes **Citizens Finance** \$13,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Auto Deficiency

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 21_of 59

Debtor 1 Charmaine S. Clark Case number (if know) 4.8 \$300.00 City of Rockford Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 425 E. State St. Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Utilities ☐ Yes 4.9 Comcast Last 4 digits of account number \$700.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. **PO Box 3005** Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes Comenity Bank/Victorias Secret \$272.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Case 17-80756

Page 22 of 59 Case number (if know) Document Debtor 1 Charmaine S. Clark

4.1 1	Commonwealth Edison	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor	When was the debt incurred?	
	Oakbrook Terrace, IL 60181 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поли	
		☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utilities	
4.1	Credit One Bank NA	Last 4 digits of account number	\$456.00
2	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred?	<u> </u>
	PO Box 98872 Las Vegas, NV 89193 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset? —	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.1 3	Cricket Wireless	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 3774 East State St.	When was the debt incurred?	
	Rockford, IL 61108		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ res	■ Other. Specify Utilities	

Case 17-80756 Entered 03/31/17 15:59:19 Doc 1 Filed 03/31/17 Desc Main Document Page 23 of 59 Debtor 1 Charmaine S. Clark Case number (if know) 4.1 Dept of Ed/Navient \$23,118.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9635 When was the debt incurred? Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Student Loans 4.1 **DirecTV** \$262.00 Last 4 digits of account number 5 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.1 \$600.00 Dish Network LLC Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 9601 S Meridian Blvd Englewood, CO 80112-5905 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utilities

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19

Desc Main Page 24 of 59 Document Debtor 1 Charmaine S. Clark Case number (if know) 4.1 Ditech \$84,431.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. 9/21/2007 When was the debt incurred? PO Box 6172 Rapid City, SD 57709-6176 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Foreclosure 4.1 **Express Cash Mart of Illinois, LLC** \$500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 5598 Elgin, IL 60121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.1 **GECRB/Care Credit** \$463.00 9 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 965036 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

Case 17-80756 Entered 03/31/17 15:59:19 Desc Main Doc 1 Filed 03/31/17

Document Page 25 of 59 Debtor 1 Charmaine S. Clark Case number (if know) 4.2 **Golden Valley Lending** \$600.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 635 East Highway 20 When was the debt incurred? Upper Lake, CA 95485 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Personal Loan 4.2 **IGS Energy** \$246.00 Last 4 digits of account number Nonpriority Creditor's Name 3759 West 95th Street When was the debt incurred? Evergreen Park, IL 60805 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.2 **IL Department of Human Services** \$6.900.00 Last 4 digits of account number Nonpriority Creditor's Name 100 W Randolph St #6-400 When was the debt incurred? Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Benefit Overpayment ☐ Yes

Case 17-80756 Entered 03/31/17 15:59:19 Doc 1 Filed 03/31/17 Desc Main

Document Page 26 of 59 Debtor 1 Charmaine S. Clark Case number (if know) 4.2 \$400.00 Lend Up Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 237 Kearny St. #372 San Francisco, CA 94108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.2 Navient \$32,465.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9500 When was the debt incurred? Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Student Loans 4.2 \$500.00 **Nicor Gas** Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 549 When was the debt incurred? Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Utilities

Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Case 17-80756

Page 27 of 59 Case number (if know) Document Debtor 1 Charmaine S. Clark

1.2	OSF St. Anthony Med Center	Last 4 digits of account number	\$282.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 5510 East State St.	When was the debt incurred?	
	Rockford, IL 61108-2381 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
.2	Rock River Dental	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 318 College Avenue	When was the debt incurred?	
	Rockford, IL 61104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	· · · · · · · · · · · · · · · · · · ·	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Dental Services	
.2	Rock River Water Reclamation	Last 4 digits of account number	\$109.00
	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ100.00
	Attn: Bankruptcy Dept. 3333 Kishwaukee St.	When was the debt incurred?	
	Rockford, IL 61109 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utilities	

Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Case 17-80756

Page 28 of 59 Case number (if know) Document Debtor 1 Charmaine S. Clark

4.2 9	Rock Valley Federal Credit Union	Last 4 digits of account number	\$300.00
,	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1201 Clifford Ave.	When was the debt incurred?	
	Loves Park, IL 61111 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdraft Fees	
4.3	Security Finance Corporation	Last 4 digits of account number	\$535.00
<u> </u>	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 3146	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Spartanburg, SC 29304 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only		
	Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.3	Sprint	Last 4 digits of account number	\$1,400.00
·	Nonpriority Creditor's Name	- <u> </u>	
	KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utilities	
		· · ·	

Debto	Case 17-80756 Doc 1	Filed 03/31/17 Entered 03/31/17 15:59:19 Desc M Document Page 29 of 59 Case number (if know)	ain
4.3	SYNCB/Wal-Mart Nonpriority Creditor's Name	Last 4 digits of account number	\$244.00
	Attn: Bankruptcy Dept. PO Box 965024	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: Student loans	
	Is the claim subject to offset? No Yes	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
4.3	Verizon Wireless	Other. Specify Credit Card Purchases	\$990.00
3	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 26055	Last 4 digits of account number When was the debt incurred?	φ990.00
	Minneapolis, MN 55426 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset? ■ No	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 	
	Yes	■ Other. Specify <u>Utilities</u>	
4.3 4	Winnebago County Health Department	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name 401 Division St. PO Box 4009	When was the debt incurred?	
	Rockford, IL 61110 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	

Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans $\hfill\square$ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ■ Other. Specify Medical Bills

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Page 30 of 59 Case number (if know) Document

Debtor 1 Charmaine S. Clark

Name and Address Afni Attn: Bankruptcy Dept.	On which entry in Part 1 or Part 2 di Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 3097		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Bloomington, IL 61702-3097	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Convergent Healthcare Inc.	Line 4.26 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Peoria, IL 61602			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	· _	
EOS CCA 700 Longwater Drive	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Norwell, MA 02061	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address		Protiboral production	
Name and Address Equifax	On which entry in Part 1 or Part 2 di Line 4.1 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 740256		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Atlanta, GA 30374	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Experian	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 4500 Allen, TX 75013		Part 2: Creditors with Nonpriority Unsecured Claims	
7.11011, 17.70010	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	,	
Green Tree Servicing 332 Minnesota Street #3610	Line 4.17 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Saint Paul, MN 55101		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address IC System	On which entry in Part 1 or Part 2 di Line 4.15 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
444 Highway 96 East	Line 4.13 of (Check one).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
PO Box 64378		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Paul, MN 55164-0378	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Portfolio Recovery Associates	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Norfolk, VA 23502			
,	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	· _	
Recovery One LLC 5100 Park Center Avenue, Suite 100	Line 4.21 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Dublin, OH 43017		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Rockford Mercantile Agency	On which entry in Part 1 or Part 2 di	· _	
Attn: Bankruptcy Dept.	Line <u>4.26</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
2502 S Alpine Rd		- Part 2: Creditors with Nonpriority Unsecured Claims	
Rockford, IL 61108	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
TransUnion	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
555 West Adams Street	·	•	

Entered 03/31/17 15:59:19 Desc Main Case 17-80756 Doc 1 Filed 03/31/17 Page 31 of 59 Case number (if know) Document

Debtor 1 Charmaine S. Clark

Chicago, IL 60661	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims		
Name and Address United Credit Service PO Box 740 Elkhorn, WI 53121	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.28 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ ——	0.00
	ou.	other flow and control priority and control control of the control	ou.	Ψ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	00.	Total Friority. And inics of through od.	00.	, ——	0.00
					Total Claim
	6f.	Student loans	6f.	\$	55,583.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ ——	0.00
	6i.		6i.	Ψ	0.00
	OI.	Other. Add all other nonpriority unsecured claims. Write that amount here.	UI.	\$	122,423.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	178,006.62

		17(7(4)1111)	111 1 71111. 37 (11 33.7	
Fill in this infor	mation to identify your	case:		
Debtor 1	Charmaine S. Cla	ark		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

.1 Vaughn's TV & Appliance 3833 Auburn Rd Rockford, IL 61101 Mattress, \$76/month, Lessee

		Docume	ent Page 33 d	า 59	
Fill in this	information to identify your				
Debtor 1	Charmaine S. Cla	ırk			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	• •				
Case numb (if known)	ber				☐ Check if this is an
					amended filing
Official	l Form 106H				
	lule H: Your Cod	ohtors			12/15
Julieu	idie II. Todi Cod	CDIOIS			12/15
our name	and case number (if known) you have any codebtors? (If	. Answer every question			p of any Additional Pages, write
1. 00	you have any codebiors: (II	you are ming a joint case,	do not list either spouse	e as a codebior.	
■ No □ Yes	s				
	hin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include)
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street	State	ZIP Code		
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	
	Name			Schedule E/F,	
				☐ Schedule G, lir	
	Number Street			_	
	City	State	ZIP Code		

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 34 of 59

Fill	in this information to identify your ca	200.								
	otor 1 Charmaine S									
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)		-			☐ An ☐ A s		J	ostpetition chapt wing date:	ter
<u>O</u>	fficial Form 106I					MM	1 / DD/ Y	YYY		
S	chedule I: Your Inc	ome							1	2/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment	r spouse is not filing wi	ith you, do not includ	e infori	matio	n about y	our spo	use. If more	space is neede	ed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-filing	g spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			[☐ Employed			
			☐ Not employed				☐ Not employed			
	employers.	Occupation	CNA/DSP							
	Include part-time, seasonal, or self-employed work.	Employer's name	Amberwood Care	e Cent	er					
	Occupation may include student or homemaker, if it applies.	Employer's address	2313 North Rock Rockford, IL 611	/enu	e					
		How long employed to	here? 4 month	s			_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	oort for	any li	ine, write \$	60 in the	space. Includ	e your non-filing)
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emplo	yers for th	at perso	n on the lines	below. If you ne	eed
						For Debte	or 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,4	39.95	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	

1,439.95

N/A

Calculate gross Income. Add line 2 + line 3.

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 35 of 59

Deb	tor 1	Charmaine S. Clark	-	(Case r	number (<i>if ki</i>	nown)				
					F	D-1-14		-	D-1-1	0	
					For	Debtor 1			or Debtor on-filing s		
	Copy	y line 4 here	4.		\$	1,439	9.95	\$	······································	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	143	3.76	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	: .	\$	(0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	d.	\$	(0.00	\$		N/A	<u> </u>
	5e.	Insurance	5e		\$		0.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	_
	5g.	Union dues	5g		\$		0.00	\$		N/A	
_	5h.	Other deductions. Specify:	_	1.+			0.00			N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		3.76	\$		N/A	_
7.	Caic	rulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,296	5.19	\$		N/A	<u>. </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$		0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$	(0.00	\$		N/A	<u>. </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	80		\$		0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$		0.00	\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e	€.	\$	(0.00	\$		N/A	<u></u>
	OI.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Assistance	e 8f.		\$	453	3.00	\$		N/A	
	8g.	Pension or retirement income	 8g	J.	\$	(0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	(0.00	+ \$		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	453	3.00	\$		N/	A
10	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$		1,749.19	+ \$		N/A	= \$	1,749.19
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,745.15	T Ψ.		IN/A		1,745.15
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depe			•			Schedul	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines								\$Combi	
13.	Do v	ou expect an increase or decrease within the year after you file this form	2							month	ly income
13.	DO y	No.	•								
	_	No. Ves Evnlain									

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 36 of 59

	· ()- · (- ·	diameter interesting												
		ation to identify yo												
Charmaine S. Clark							Check if this is: An amended filing							
Deb	otor 2							-	ving postpetition chapter					
(Spo	ouse, if filing)				13 expenses as of the following date:									
Unit	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							MM / DD / YYYY						
	e number nown)													
Of	fficial Fo	orm 106J			-									
Sc	chedule	J: Your I	Exper	ses					12/1					
Be info	as complete a prinction. If mater (if know	and accurate as nore space is nee n). Answer ever	possible eded, atta y questio	If two married people ar ch another sheet to this										
Par 1.	Is this a joir	ribe Your House nt case?	noia											
	■ No. Go to	o line 2.		ata bassa da 140										
	⊔ Yes. Doe	es Debtor 2 live i	n a separ	ate nousenoid?										
	= ::	-	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of D	ebtor	2.						
2.	Do you have	e denendents?	Пыс	. ,	,									
۷.	Do you have dependents? ☐ No Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent			Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?					
						_			□ No					
	Do not state dependents				Son			4	■ Yes					
							_		□ No					
					Son			8	■ Yes					
									□ No					
					Daughter				Yes					
					Son			21	■ No					
3.	Do vour ext	oenses include	_		3011				☐ Yes					
0.	expenses o	f people other th	nan 👝	No Yes										
	yourself and	d your depender	nts? ⊔	165										
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp										
the	value of sucl	h assistance and	non-cash d d have inc	government assistance i	f you know our Income									
(Off	ficial Form 10)6I.)					_	Your expe	enses					
4.		or home owners!		ses for your residence. I	nclude first mortgage	e 4.	\$		775.00					
	. ,	ded in line 4:	-				_							
	4a. Real e	estate taxes				4a.	\$		0.00					
	4b. Prope	erty, homeowner's				4b.			0.00					
		maintenance, re				4c.	_		0.00					
5.		owner's associati		dominium dues our residence, such as ho	me equity loans	4d. 5	\$ \$		0.00					
٥.	Additional I	raage payille	IOI y	a. 1001a01100, such as 110	mo oquity idalis	٥.	Ψ		0.00					

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 37 of 59

Deptor 1 C	harmaine S. Clark	Case num	ber (if known)	
6. Utilities	•			
	lectricity, heat, natural gas	6a.	\$	86.00
	/ater, sewer, garbage collection	6b.	·	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	·	227.00
	ther. Specify:	6d.	·	0.00
	nd housekeeping supplies	7.	\$	300.00
	re and children's education costs	8.	\$	43.00
	g, laundry, and dry cleaning	9.	·	45.00
	al care products and services	9. 10.		
	l and dental expenses	11.	·	30.00
	•	11.	Φ	0.00
	ortation. Include gas, maintenance, bus or train fare. nclude car payments.	12.	\$	60.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ble contributions and religious donations	14.		0.00
5. Insuran	<u> </u>	14.	Ψ	0.00
	nclude insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance	15a.	\$	0.00
	ealth insurance	15b.		0.00
	ehicle insurance	15c.	·	81.00
	ther insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
Specify:		16.	\$	0.00
	nent or lease payments:		<u> </u>	0.00
	ar payments for Vehicle 1	17a.	\$	0.00
	ar payments for Vehicle 2	17b.		0.00
	other. Specify: Vaughn's	17c.	·	76.00
	ther. Specify:	17d.	·	
	numer. Specify. Syments of alimony, maintenance, and support that you did not report a		Φ	0.00
	ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.	·	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Sch	-	our Income	
	lortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
	roperty, homeowner's, or renter's insurance	20c.		0.00
	laintenance, repair, and upkeep expenses	20d.		0.00
	omeowner's association or condominium dues	20a. 20e.	·	0.00
			·	
1. Other: S	Specify:	21.	+Φ	0.00
2. Calcula	te your monthly expenses			
22a. Ad	d lines 4 through 21.		\$	1,723.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	d line 22a and 22b. The result is your monthly expenses.		\$	1,723.00
220. Au	a into 22a and 22b. The result to your monthly expenses.			1,123.00
	te your monthly net income.			
23a. C	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,749.19
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	1,723.00
				,
	ubtract your monthly expenses from your monthly income.			00.40
Т	he result is your monthly net income.	23c.	\$	26.19
	expect an increase or decrease in your expenses within the year after y			and an decrease to the second
	nple, do you expect to finish paying for your car loan within the year or do you expect yo ion to the terms of your mortgage?	our mortgage p	payment to increa	ise or decrease because o
_	ion to the terms of your mortgage:			
■ No.	[=			
ΠYes	Explain here:			

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 38 of 59

Fill in this infor	mation to identify your	case:			
Debtor 1	Charmaine S. Cla				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Form		ın Individual	Debtor's Sch	nedules	12/15
If two married p	eople are filing togethe	r, both are equally respon	nsible for supplying corre	ect information.	
obtaining mone		n connection with a bank			ent, concealing property, or or imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	with this declaration	and
X /s/ Cha	armaine S. Clark		X		
	naine S. Clark		Signature of D	ebtor 2	

Date

Signature of Debtor 1

Date March 31, 2017

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 39 of 59

	s information to identify you				
Debtor 1	Charmaine S. Cl First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case nun	nber				
(if known)				_	Check if this is an
				a	mended filing
O((; · ·	15407				
	al Form 107				
Stater	ment of Financial	Attairs for Individ	duals Filing for B	ankruptcy	4/16
	nplete and accurate as possi on. If more space is needed,				
	if known). Answer every ques		uns form. On the top of an	y additional pages, write you	ii name and case
Part 1:	Give Details About Your Ma	rital Status and Where You	Lived Before		
1. What	t is your current marital statu	ue?			
i. vviia	t is your current mantai statu	15 :			
_	Married				
-	Not married				
2. Durii	ng the last 3 years, have you	lived anywhere other than v	where you live now?		
	No				
	Yes. List all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
Deb	tor 1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
281	3 Auburn Street	From-To:	☐ Same as Debtor	1	Same as Debtor 1
Roc	ckford, IL 61101	4/2008 - 8/2014			From-To:
states and	in the last 8 years, did you ev d territories include Arizona, Ca No Yes. Make sure you fill out <i>Sch</i>	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R		
Part 2	Explain the Sources of You	r Income			
Fill in	you have any income from en the total amount of income you are filing a joint case and you	u received from all jobs and a	all businesses, including part	time activities.	ndar years?
	No				
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	nuary 1 of current year until you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,322.93	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		Operating a business	

Entered 03/31/17 15:59:19 Desc Main Case 17-80756 Doc 1 Filed 03/31/17 Page 40 of 59 Case number (if known) Document

Debtor 1 Charmaine S. Clark

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$19,448.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$28,000.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No Yes. Fill in the details.	se and you have income that	you received together, list it o	nly once under Debtor 1.	- ,
	Dahtan 4		Dahtan 0	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	SNAP/LINK/Food Stamps	\$1,359.00		
For last calendar year: (January 1 to December 31, 2016)	SNAP/LINK/Food Stamps	\$5,436.00		
	Unemployment	\$6,900.00		
For the calendar year before that: (January 1 to December 31, 2015)	SNAP/LINK/Food Stamps	\$5,436.00		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcy		
6. Are either Debtor 1's or Debtor 2 ☐ No. Neither Debtor 1 nor Debtor 1 nor Debtor 2 individual primarily for a		umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
During the 90 days befo ☐ No. Go to line 7	ore you filed for bankruptcy, di	id you pay any creditor a total	of \$6,425* or more?	
☐ Yes List below e paid that cr not include	each creditor to whom you pa editor. Do not include paymer payments to an attorney for t	nts for domestic support oblig his bankruptcy case.	n one or more payments and t ations, such as child support a or after the date of adjustment	and alimony. Also, do

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

> List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Álso, do not include payments to an attorney for this bankruptcy case.

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Page 41 of 59
Case number (if known) Document

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpor of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including of a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.				al partner; corporations gent, including one for		
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on ac	count of a d	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
	☐ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
	Citizens Finance Attn: Bankruptcy Dept.	2013 Hyundai Sonata	3	1/201	7	\$7,000.00
	6457 N 2nd St Loves Park, IL 61111	Property was reposse				
	Loves Faik, IL 01111	☐ Property was foreclos ☐ Property was garnishe				
		☐ Property was garnished				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	otcy, did any creditor, incl	<u> </u>	nancial institution	set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		rty in the possess		for the bene	efit of creditors, a

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Page 42 of 59
Case number (if known) Document

Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cor	otcy, did you give any gifts or contributions with a totantribution.	al value of more than	\$600 to any charity?				
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrupt or gambling? No Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,				
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required		rty to anyone you				
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95	3/20/2017	\$14.95				
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$500.00	3/2017	\$500.00				

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Page 43 of 59 Case number (if known) Document

17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you not include any pa	ors or to make payments			perty to anyone who
	Person Who Was Paid Address	Description and variansferred	alue of any propert	y Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your burned include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as	airs? the granting of a secu		
	Person Who Received Transfer Address	Description and v	red	Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrul beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a self	-settled trust or similar devic	e of which you are a
	Name of trust	Description and v	value of the property	y transferred	Date Transfer was made
Pai	18: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Storag	e Units	
20. Within 1 year before you filed for bankruptcy, were any financial accounts sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; cerhouses, pension funds, cooperatives, associations, and other financial ins		nts; certificates of c	•		
	☐ Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	r bankruptcy, any sa	afe deposit box or other depo	ository for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1 yea	r before you filed for bankruր	otcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Page 44 of 59
Case number (if known) Document

Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty yo	u borrowed from, are storing fo	r, or hold in trust		
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value		
Par	t 10: Give Details About Environmental Inform	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, groun					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law,	whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s was	te, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n the	y occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e und	er or in violation of an environm	ental law?		
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admini	strative proceeding under any env	rironm	nental law? Include settlements	and orders.		
	■ No						
	☐ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to an	y business?		
	☐ A sole proprietor or self-employed in a	•	-	_			
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (Ll	LP)			
	☐ A partner in a partnership						
	☐ An officer, director, or managing execu	tive of a corporation					
	☐ An owner of at least 5% of the voting or	equity securities of a corporation	l				

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Page 45 of 59 Case number (if known) Document Debtor 1 Charmaine S. Clark No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charmaine S. Clark Signature of Debtor 2 Charmaine S. Clark Signature of Debtor 1 Date March 31, 2017 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

□ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 46 of 59

Fill in this infor	mation to identify your	case:		
Debtor 1	Charmaine S. Clark			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo		n for Individu	ıals Filing Under	Chapter 7 12/15
If you are an inc	lividual filing under cha	pter 7, you must fill out t	his form if:	
creditors have	e claims secured by yo	ur property, or		
You must file th	is form with the court w ever is earlier, unless th		le your bankruptcy petition or l	by the date set for the meeting of creditors, I copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 47 of 59

Debtor 1 Charmaine S. Clark		ne S. Clark	Case number (if known)			
nam	e:		Retain the property and redeem it.	☐ Yes		
Desc	cription of		Retain the property and enter into a Reaffirmation Agreement.			
prop	•		Retain the property and [explain]:			
	uring debt:		— Retain the property and [explain].			
Part 2:	List Your U	nexpired Personal Property Leases				
or any n the ir	unexpired per	sonal property lease that you listed bw. Do not list real estate leases. Ur	in Schedule G: Executory Contracts an expired leases are leases that are still i the trustee does not assume it. 11 U.S.C	d Unexpired Leases (Official Form 106G), fill n effect; the lease period has not yet ended. c. § 365(p)(2).		
Descri	be your unexp	ired personal property leases		Will the lease be assumed?		
Lessor'	's name:	Vaughn's TV & Appliance		□ No		
				■ Yes		
Descrip Proper	otion of leased ty:	Mattress, \$76/month, Lessee				
Part 3:	Sign Below					
		ıry, I declare that I have indicated m ct to an unexpired lease.	y intention about any property of my es	ate that secures a debt and any personal		
X /s	/ Charmaine	S. Clark	X			
_	harmaine S. (ignature of Debt		Signature of Debtor 2			
D	ate March	31, 2017	Date			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80756 Doc 1 Filed 03/31/17 Entered 03/31/17 15:59:19 Desc Main Document Page 52 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Charmaine S. Clark		Case No).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOI	RNEY FOR I	DEBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the for rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy,	or agreed to be pa	id to me, for service	
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have receive	ed	s	500.00	
				0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed co	empensation with any other person	unless they are me	embers and associate	tes of my law firm.
	☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspect	s of the bankruptc	y case, including:	
l o	a. Analysis of the debtor's financial situation, and respondent of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the avoidance of liens on	statement of affairs and plan which ditors and confirmation hearing, and to reduce to market value; exceptions as needed; preparation	may be required; and any adjourned be mption planning	earings thereof;	and filing of
6. l	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			nces, relief from	stay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me fo	r representation of	the debtor(s) in
М	arch 31, 2017	/s/ Daniel A. Spri			
D	ate	Daniel A. Springe Signature of Attorne			
		Springer Law Fire			
		2222 E State St			
		Suite 107 Rockford, IL 6110	14		
		815.312.4725			
		_dspringerlaw@gi	mail.com		
		Name of law firm			

Springer Law Firm

2222 East State St. # A-104A, Rockford, IL

815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings,
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case, I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NQT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated:	3/	24	/1	7	
			l^{-}		

Signature: Charmai Clar
Print Name: Charmaine Clark

Attorney Signature: M. M.

Attorney Print: M. & La. 1 Blesser al

United States Bankruptcy Court Northern District of Illinois

In re	Charmaine S. Clark		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR MAT	RIX	
		Number of Cre	editors: _	45
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	is true and	correct to the best of my
Date:	March 31, 2017	/s/ Charmaine S. Clark Charmaine S. Clark Signature of Debtor		

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

AT&T Mobility Attn: Bankruptcy Dept. PO Box 536216 Atlanta, GA 30353-6216

Banquet Financial Attn: Bankruptcy Dept. 607 Dundee Ave Elgin, IL 60120

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

CashNet
Attn: Bankruptcy Dept.
1301 Marina Village Pkwy Ste 100
Alameda, CA 94501-1058

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

City of Rockford Attn: Bankruptcy Dept. 425 E. State St. Rockford, IL 61104

Comcast
Attn: Bankruptcy Dept.
PO Box 3005
Southeastern, PA 19398

Comenity Bank/Victorias Secret PO Box 182789 Columbus, OH 43218

Commonwealth Edison Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Credit One Bank NA Attn: Bankruptcy Dept. PO Box 98872 Las Vegas, NV 89193

Cricket Wireless Attn: Bankruptcy Dept. 3774 East State St. Rockford, IL 61108

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773

DirecTV Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550

Dish Network LLC Attn: Bankruptcy Dept. 9601 S Meridian Blvd Englewood, CO 80112-5905

Ditech Attn: Bankruptcy Dept. PO Box 6172 Rapid City, SD 57709-6176

EOS CCA 700 Longwater Drive Norwell, MA 02061

Equifax PO Box 740256 Atlanta, GA 30374 Experian PO Box 4500 Allen, TX 75013

Express Cash Mart of Illinois, LLC Attn: Bankruptcy Dept. PO Box 5598 Elgin, IL 60121

GECRB/Care Credit Attn: Bankruptcy Dept. PO Box 965036 Orlando, FL 32896

Golden Valley Lending 635 East Highway 20 Upper Lake, CA 95485

Green Tree Servicing 332 Minnesota Street #3610 Saint Paul, MN 55101

IC System
444 Highway 96 East
PO Box 64378
Saint Paul, MN 55164-0378

IGS Energy 3759 West 95th Street Evergreen Park, IL 60805

IL Department of Human Services 100 W Randolph St #6-400 Chicago, IL 60601

Lend Up Attn: Bankruptcy Dept. 237 Kearny St. #372 San Francisco, CA 94108

Navient PO Box 9500 Wilkes Barre, PA 18773 Nicor Gas P.O. Box 549 Aurora, IL 60507

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100 Norfolk, VA 23502

Recovery One LLC 5100 Park Center Avenue, Suite 100 Dublin, OH 43017

Rock River Dental 318 College Avenue Rockford, IL 61104

Rock River Water Reclamation Attn: Bankruptcy Dept. 3333 Kishwaukee St. Rockford, IL 61109

Rock Valley Federal Credit Union Attn: Bankruptcy Dept. 1201 Clifford Ave. Loves Park, IL 61111

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304

Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251 SYNCB/Wal-Mart Attn: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

TransUnion 555 West Adams Street Chicago, IL 60661

United Credit Service PO Box 740 Elkhorn, WI 53121

Vaughn's TV & Appliance 3833 Auburn Rd Rockford, IL 61101

Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426

Winnebago County Health Department 401 Division St. PO Box 4009 Rockford, IL 61110